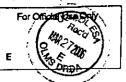
EMPLOYEE REPORT

This report is mendatory under P.L. 66-257, as amended. Follure to comply may result in criminal prosecution, tines, or civil penalties as provided by 29 U.S.C 439 or 440,



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File N	umber U- 8633		2. Fiscal Year Covered From: 01 / 01 / 05 Through: 12 / 31 / 05	
3. Name and address of person filing. Name Daniel R. Knight			4. Name, file number, and address of labor organization. United Union of Roofers, Waterproofers Name & Allied Workers Local No. 2	
			Labor Organization File Number 019-548	
P.O. Box, Bldg., Room No., if any			P.O. Box, Building and Room Number, if any	
Street	203 England Dr.		Street 2920 Locust St.	
City	O'Fallon		Cay St. Louis	
State	Mo-	ZIP Code + 4 63366-1169	State Mo ZIP Code + 4 63103-1311	
5. Positio	n in labor organization. Apprentice Coordin	ator, Executive Boar	i member	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (exceptions as appealised in the exclusions set forth in the instructions):

of interest, Transaction, or income.
•

Signature

15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, ecoroct, and complete. (See the se-	ing documents), has been exam	nined by the signatory and is, to the be-	ation st of the
(300 110	coon on policinos at the district	NIS.)	
Signed Comments	on 3/20/06	(314) 535-9683 Telephone Number	.

SE SENTENCE OF STATE

Form LIA-30 (2003)

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